



QUARTERLY STATEMENT
AS OF SEPTEMBER 30, 2015
OF THE CONDITION AND AFFAIRS OF THE
Meridian Health Plan of Michigan, Inc.

NAIC Group Code	4640 (Current Period)	4640 (Prior Period)	NAIC Company Code	52563	Employer's ID Number	38-3253977
Organized under the Laws of	Michigan		State of Domicile or Port of Entry	Michigan		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[]		Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[X] N/A[]		Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]	
Incorporated/Organized	12/31/1995		Commenced Business	12/31/1995		
Statutory Home Office	777 Woodward Ave. Suite 600 (Street and Number)		Detroit, MI, US 48226 (City or Town, State, Country and Zip Code)			
Main Administrative Office			777 Woodward Ave. Suite 600 (Street and Number)			
	Detroit, MI, US 48226 (City or Town, State, Country and Zip Code)		(313)324-3700 (Area Code) (Telephone Number)			
Mail Address	777 Woodward Ave. Suite 600 (Street and Number or P.O. Box)		Detroit, MI, US 48226 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records			777 Woodward Avenue Suite 600 (Street and Number)			
	Detroit, MI, US 48226 (City or Town, State, Country and Zip Code)		(313)324-3700 (Area Code) (Telephone Number)			
Internet Web Site Address	www.mhplan.com					
Statutory Statement Contact	Matthew Agnone (Name)		(313)324-3700 (Area Code)(Telephone Number)(Extension)			
	matthew.agnone@mhplan.com (E-Mail Address)		(313)324-1822 (Fax Number)			

OFFICERS

Name	Title
Jon B. Cotton	President
Sean P. Cotton	Secretary
Janice Torosian	Treasurer

OTHERS

DIRECTORS OR TRUSTEES

David B. Cotton M.D. #
Karie Pastemak
George Ellis

State of Michigan
County of Wayne ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
Jon B. Cotton	Sean P. Cotton	Janice Torosian
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me this
day of , 2015

- a. Is this an original filing?
b. If no, 1. State the amendment number
2. Date filed
3. Number of pages attached

Yes[X] No[]

(Notary Public Signature)

ASSETS

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	78,953,112		78,953,112	53,476,960
2.	Stocks:				
2.1	Preferred stocks				
2.2	Common stocks	10,528,100		10,528,100	11,178,881
3.	Mortgage loans on real estate:				
3.1	First liens				
3.2	Other than first liens				
4.	Real estate:				
4.1	Properties occupied by the company (less \$.....0 encumbrances)				
4.2	Properties held for the production of income (less \$.....0 encumbrances)				
4.3	Properties held for sale (less \$.....0 encumbrances)				
5.	Cash (\$.....193,793,162), cash equivalents (\$.....0) and short-term investments (\$.....31,857,693)	225,650,855		225,650,855	215,601,528
6.	Contract loans (including \$.....0 premium notes)				
7.	Derivatives				
8.	Other invested assets	1,516,477	1,290,211	226,266	226,266
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	316,648,544	1,290,211	315,358,333	280,483,635
13.	Title plants less \$.....0 charged off (for Title insurers only)				
14.	Investment income due and accrued	805,456	30,105	775,351	740,930
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection				
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)				
15.3	Accrued retrospective premiums	3,013,682		3,013,682	1,420,000
16.	Reinsurance:				
16.1	Amounts recoverable from reinsurers	3,581,762		3,581,762	1,035,902
16.2	Funds held by or deposited with reinsured companies				
16.3	Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans	16,454,660		16,454,660	8,087,635
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset	1,336,292		1,336,292	1,336,292
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$.....0)				
22.	Net adjustments in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$.....30,298,346) and other amounts receivable	75,133,760	783,626	74,350,134	31,400,261
25.	Aggregate write-ins for other than invested assets	3,027	3,027		
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	416,977,183	2,106,969	414,870,214	324,504,655
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)	416,977,183	2,106,969	414,870,214	324,504,655
DETAILS OF WRITE-INS					
1101.	.....			
1102.	.....			
1103.	.....			
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.	Deposits	3,027	3,027		
2502.	Acquired Memberships				
2503.	.....			
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	3,027	3,027		

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$.....0 reinsurance ceded)	258,017,168		258,017,168	196,177,534
2.	Accrued medical incentive pool and bonus amounts	2,674,174		2,674,174	2,357,151
3.	Unpaid claims adjustment expenses	1,289,034		1,289,034	1,056,000
4.	Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act				
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance	15,317		15,317	1,385
9.	General expenses due or accrued	7,684,534		7,684,534	12,905,586
10.1	Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses))	9,093,098		9,093,098	1,925,337
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated				
14.	Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current)				
15.	Amounts due to parent, subsidiaries and affiliates	2,940,112		2,940,112	2,675,216
16.	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$.....0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans	14,201		14,201	6,962
23.	Aggregate write-ins for other liabilities (including \$.....0 current)				
24.	Total liabilities (Lines 1 to 23)	281,727,638		281,727,638	217,105,171
25.	Aggregate write-ins for special surplus funds	X X X	X X X	20,353,136	29,425,639
26.	Common capital stock	X X X	X X X	44,700	44,700
27.	Preferred capital stock	X X X	X X X		
28.	Gross paid in and contributed surplus	X X X	X X X	36,451,363	16,451,363
29.	Surplus notes	X X X	X X X		
30.	Aggregate write-ins for other than special surplus funds	X X X	X X X		
31.	Unassigned funds (surplus)	X X X	X X X	76,293,377	61,477,782
32.	Less treasury stock, at cost:				
32.1	.....0 shares common (value included in Line 26 \$.....0)	X X X	X X X		
32.2	.....0 shares preferred (value included in Line 27 \$.....0)	X X X	X X X		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	X X X	X X X	133,142,576	107,399,484
34.	Total Liabilities, capital and surplus (Lines 24 and 33)	X X X	X X X	414,870,214	324,504,655
DETAILS OF WRITE-INS					
2301.	.....			
2302.	.....			
2303.	.....			
2398.	Summary of remaining write-ins for Line 23 from overflow page				
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)				
2501.	Estimate of ACA Health Insurer Fee Surplus	X X X	X X X	20,353,136	29,425,639
2502.	.....	X X X	X X X		
2503.	.....	X X X	X X X		
2598.	Summary of remaining write-ins for Line 25 from overflow page	X X X	X X X		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	X X X	X X X	20,353,136	29,425,639
3001.	.....	X X X	X X X		
3002.	.....	X X X	X X X		
3003.	.....	X X X	X X X		
3098.	Summary of remaining write-ins for Line 30 from overflow page	X X X	X X X		
3099.	TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above)	X X X	X X X		

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	X X X	3,818,866	3,103,722	4,259,158
2.	Net premium income (including \$.....0 non-health premium income)	X X X	1,498,483,270	1,004,593,798	1,418,690,846
3.	Change in unearned premium reserves and reserves for rate credits	X X X			
4.	Fee-for-service (net of \$.....0 medical expenses)	X X X			
5.	Risk revenue	X X X			
6.	Aggregate write-ins for other health care related revenues	X X X	43,853,544	24,752,030	24,626,991
7.	Aggregate write-ins for other non-health revenues	X X X			
8.	Total revenues (Lines 2 to 7)	X X X	1,542,336,814	1,029,345,828	1,443,317,837
Hospital and Medical:					
9.	Hospital/medical benefits		997,421,920	672,979,985	947,838,559
10.	Other professional services		8,145,811	4,998,868	7,439,057
11.	Outside referrals		73,731,473	39,604,240	61,928,282
12.	Emergency room and out-of-area		17,114,182	11,859,318	16,867,549
13.	Prescription drugs		163,937,198	116,705,921	161,400,710
14.	Aggregate write-ins for other hospital and medical		264,891	353,765	267,389
15.	Incentive pool, withhold adjustments and bonus amounts		8,917,349	8,226,251	10,701,384
16.	Subtotal (Lines 9 to 15)		1,269,532,824	854,728,348	1,206,442,930
Less:					
17.	Net reinsurance recoveries		3,663,205	251,691	884,807
18.	Total hospital and medical (Lines 16 minus 17)		1,265,869,619	854,476,657	1,205,558,123
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$.....0 cost containment expenses		6,135,926	3,056,085	4,399,240
21.	General administrative expenses		244,268,037	157,830,443	222,736,161
22.	Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only)				(956,000)
23.	Total underwriting deductions (Lines 18 through 22)		1,516,273,582	1,015,363,185	1,431,737,524
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	X X X	26,063,232	13,982,643	11,580,313
25.	Net investment income earned		773,871	762,661	1,123,610
26.	Net realized capital gains (losses) less capital gains tax of \$.....41,270		80,113	199,642	624,455
27.	Net investment gains or (losses) (Lines 25 plus 26)		853,984	962,303	1,748,065
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]				
29.	Aggregate write-ins for other income or expenses		148,117	146,038	217,082
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	X X X	27,065,333	15,090,984	13,545,460
31.	Federal and foreign income taxes incurred	X X X	20,571,494	11,421,894	10,153,765
32.	Net income (loss) (Lines 30 minus 31)	X X X	6,493,839	3,669,090	3,391,695
DETAILS OF WRITE-INS					
0601.	ACA Insurer Fee	X X X	43,853,544	24,752,030	24,626,991
0602.	.....	X X X			
0603.	.....	X X X			
0698.	Summary of remaining write-ins for Line 6 from overflow page	X X X			
0699.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X	43,853,544	24,752,030	24,626,991
0701.	.....	X X X			
0702.	.....	X X X			
0703.	.....	X X X			
0798.	Summary of remaining write-ins for Line 7 from overflow page	X X X			
0799.	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)	X X X			
1401.	Hearing/Speech devices		264,891	353,765	267,389
1402.	.....			
1403.	.....			
1498.	Summary of remaining write-ins for Line 14 from overflow page				
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)		264,891	353,765	267,389
2901.	Miscellaneous revenue		148,117	146,038	217,082
2902.	.....			
2903.	.....			
2998.	Summary of remaining write-ins for Line 29 from overflow page				
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)		148,117	146,038	217,082

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT				
33.	Capital and surplus prior reporting year	107,399,484	88,623,500	88,623,500
34.	Net income or (loss) from Line 32	6,493,839	3,669,090	3,391,695
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....0	(663,982)	(493,087)	(875,161)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			671,297
39.	Change in nonadmitted assets	(86,765)	59,206	(611,847)
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
44.1	Paid in			
44.2	Transferred from surplus (Stock Dividend)			
44.3	Transferred to surplus			
45.	Surplus adjustments:			
45.1	Paid in	20,000,000		16,200,000
45.2	Transferred to capital (Stock Dividend)			
45.3	Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus			
48.	Net change in capital and surplus (Lines 34 to 47)	25,743,092	3,235,209	18,775,984
49.	Capital and surplus end of reporting period (Line 33 plus 48)	133,142,576	91,858,709	107,399,484
DETAILS OF WRITE-INS				
4701.	.....	.....	.....	.....
4702.	.....	.....	.....	.....
4703.	.....	.....	.....	.....
4798.	Summary of remaining write-ins for Line 47 from overflow page .....	.....	.....	.....
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above) .....	.....	.....	.....

CASH FLOW

		1	2	3
		Current	Prior	Prior
		Year	Year	Year Ended
		To Date	To Date	December 31
Cash from Operations				
1.	Premiums collected net of reinsurance	1,485,079,591	998,254,545	1,423,353,463
2.	Net investment income	1,515,481	1,440,767	1,863,741
3.	Miscellaneous income	13,333,424		
4.	TOTAL (Lines 1 to 3)	1,499,928,496	999,695,312	1,425,217,204
5.	Benefit and loss related payments	1,206,258,822	818,059,489	1,126,917,841
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	263,603,649	155,421,022	223,389,928
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses)	13,445,003	1,297,154	11,123,695
10.	TOTAL (Lines 5 through 9)	1,483,307,474	974,777,665	1,361,431,464
11.	Net cash from operations (Line 4 minus Line 10)	16,621,022	24,917,647	63,785,740
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds	23,095,742	16,133,607	23,347,484
12.2	Stocks		2,013,697	2,657,187
12.3	Mortgage loans			
12.4	Real estate			
12.5	Other invested assets	39,098	82,740	111,971
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments			348
12.7	Miscellaneous proceeds	7,495	10,168	3,385
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7)	23,142,335	18,240,212	26,120,375
13.	Cost of investments acquired (long-term only):			
13.1	Bonds	49,209,862	16,856,275	25,706,855
13.2	Stocks	13,202	2,033,484	2,856,094
13.3	Mortgage loans			
13.4	Real estate			
13.5	Other invested assets			
13.6	Miscellaneous applications		102,498	1
13.7	TOTAL investments acquired (Lines 13.1 to 13.6)	49,223,064	18,992,257	28,562,950
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(26,080,729)	(752,045)	(2,442,575)
Cash from Financing and Miscellaneous Sources				
16.	Cash provided (applied):			
16.1	Surplus notes, capital notes			
16.2	Capital and paid in surplus, less treasury stock	20,000,000		16,200,000
16.3	Borrowed funds			
16.4	Net deposits on deposit-type contracts and other insurance liabilities			
16.5	Dividends to stockholders			
16.6	Other cash provided (applied)	(490,966)	(732,589)	540,261
17.	Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	19,509,034	(732,589)	16,740,261
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	10,049,327	23,433,013	78,083,426
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year	215,601,528	137,518,102	137,518,102
19.2	End of period (Line 18 plus Line 19.1)	225,650,855	160,951,115	215,601,528

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
---------	--	--	--	--

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	379,347	11						2,752	365,130	11,454
2. First Quarter	411,636	31						3,302	405,219	3,084
3. Second Quarter	447,011	29						9,397	434,461	3,124
4. Third Quarter	440,797	23						8,070	429,538	3,166
5. Current Year										
6. Current Year Member Months	3,818,866	223						54,013	3,736,744	27,886
Total Member Ambulatory Encounters for Period:										
7. Physician	3,774,732	60						88,374	3,686,298	
8. Non-Physician	3,426,388	21						109,542	3,316,825	
9. Total	7,201,120	81						197,916	7,003,123	
10. Hospital Patient Days Incurred	131,987							6,307	125,680	
11. Number of Inpatient Admissions	35,218							1,316	33,902	
12. Health Premiums Written (a)	1,500,443,562	77,579						68,057,369	1,428,332,494	3,976,120
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	1,498,483,270	77,579						68,016,282	1,426,413,289	3,976,120
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	1,206,258,822	16,445						47,863,071	1,154,360,096	4,019,210
18. Amount Incurred for Provision of Health Care Services	1,269,532,824	61,847						61,113,821	1,204,078,785	4,278,371

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....68,057,369.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total
0199999 Individually Listed Claims Unpaid						
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered	10,963,566	1,101,942	1,072,641	424,515	4,775,250	18,337,914
0499999 Subtotals	10,963,566	1,101,942	1,072,641	424,515	4,775,250	18,337,914
0599999 Unreported claims and other claim reserves						239,679,254
0699999 Total Amounts Withheld						
0799999 Total Claims Unpaid						258,017,168
0899999 Accrued Medical Incentive Pool And Bonus Amounts						2,674,174

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business		Claims Paid Year to Date		Liability End of Current Quarter		5	6
		1	2	3	4	Claims Incurred in Prior Years (Columns 1+3)	Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year
		On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec 31 of Prior Year	On Claims Incurred During the Year		
1.	Comprehensive (hospital & medical)		16,445		86,869		41,467
2.	Medicare Supplement						
3.	Dental only						
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare	4,673,743	43,411,429	86,200	17,134,908	4,759,943	3,970,359
7.	Title XIX - Medicaid	171,959,545	973,220,884	20,017,494	220,428,176	191,977,039	192,161,349
8.	Other health	4,359	4,058,379		263,521	4,359	4,359
9.	Health subtotal (Lines 1 to 8)	176,637,647	1,020,707,137	20,103,694	237,913,474	196,741,341	196,177,534
10.	Healthcare receivables (a)	2,081,384	110,363			2,081,384	
11.	Other non-health						
12.	Medical incentive pools and bonus amounts	2,112,116	6,447,809		2,674,174	2,112,116	2,357,151
13.	Totals (Lines 9 - 10 + 11 + 12)	176,668,379	1,027,044,583	20,103,694	240,587,648	196,772,073	198,534,685

(a) Excludes \$.00 loans or advances to providers not yet expensed.

Notes to Financial Statement

Meridian Health Plan of Michigan, Inc.
Notes to the Financial Statements September 30, 2015

Note 1 –Summary of Significant Accounting Policies

Meridian Health Plan of Michigan, Inc. (the “Company”) operates as a state-licensed health maintenance organization (HMO). The Company provides medical services to persons in sixty-seven Michigan counties who subscribe as recipients of state health benefits (Medicaid benefits). In addition, the Company operates a Medicare Advantage Dual-Eligible Special Needs Plan, a Medicare Advantage Prescription Drug Plan and a Medicare Stand – alone Prescription Drug Plan. On March 1, 2015, the Company commenced operation of a Medicare – Medicaid Alignment Initiative Plan.

The Company contracts directly with physician/physician groups and hospitals for the provision of medical care, and compensates the providers on either a capitation or fee for service basis. The Company has a risk sharing arrangement with some primary care physicians, and a portion of the capitation payments may be retained for settlement of risk-sharing arrangements.

A. Accounting Practices

The financial statements of Meridian Health Plan of Michigan (the “Company”) are presented on the basis of accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services (“DIFS”).

The DIFS recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the Michigan Insurance Code. The DIFS has adopted the National Association of Insurance Commissioners’ (NAIC) *Accounting Practices and Procedures Manual* as a component of prescribed and permitted practices for the state. The DIFS has the right to permit specific practices that deviate from prescribed practices. There is no deviation from the NAIC *Accounting Practices and Procedures Manual*.

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the DIFS is shown below:

		State of Domicile	2015	2014
NET INCOME				
(1)	Meridian Health Plan of Michigan state basis	Michigan	\$ 6,493,839	\$ 3,391,695
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP: None	Michigan	-	-
(3)	State Permitted Practices that increase/(decrease) NAIC SAP: None	Michigan	-	-
(4)	NAIC SAP (1-2-3=4)	Michigan	\$ 6,493,839	\$ 3,391,695
SURPLUS				
(5)	Meridian Health Plan of Michigan state basis	Michigan	\$ 133,142,576	\$ 107,399,484
(6)	State Prescribed Practices that increase/(descrease) NAIC SAP: None	Michigan	-	-
(7)	State Permitted Practices that increase/(descrease) NAIC SAP: None	Michigan	-	-
(8)	NAIC SAP (5-6-7=8)	Michigan	\$ 133,142,576	\$ 107,399,484

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, primarily claims unpaid. It also required disclosures of contingent assets

Notes to Financial Statement

and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Health capitation premiums are recognized in the period members are entitled to related health care services. Health care service costs and the related liabilities for claims payable are recorded when medical services are authorized, as well as when services are provided without authorization to the extent such services are expected to be ultimately authorized. Expenses are charged to operations as incurred.

1. Short-term investments are stated at amortized cost.
2. Bonds are stated at amortized cost using the scientific interest method.
3. Common stocks are stated at fair market value.
4. The Company had no preferred stock.
5. The Company had no mortgage loans on real estate.
6. The Company had no loan-backed securities.
7. The Company had no investments in subsidiaries, controlled or affiliated entities.
8. The Company has a minor ownership interests in a joint ventures. The Company carries this interest based on the underlying audited GAAP equity of the investee.
9. The Company had no derivatives.
10. The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.
11. Claims payable includes an actuarially determined estimate of the ultimate cost of settling claims.
12. The Company has no property and equipment and related capitalization policy.
13. Pharmaceutical rebates receivable are estimated based on actual prescriptions filled.

Note 2 - Accounting Changes and Corrections of Errors

This Note is not applicable to the Company.

Note 3 - Business Combinations and Goodwill

This Note is not applicable to the Company.

Note 4 - Discontinued Operations

This Note is not applicable to the Company.

Note 5 - Investments

No change

Note 6 - Joint Ventures, Partnerships, and Limited Liability Companies

No change

Note 7 - Investment Income

This Note is not applicable to the Company.

Note 8 - Derivative Instruments

This Note is not applicable to the Company.

Note 9 - Income Taxes

Notes to Financial Statement

No change

Note 10 - Information Concerning Parent, Subsidiaries, and Affiliates

No change

Note 11 - Debt

This Note is not applicable to the Company.

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences, and Other Postretirement Benefit Plans

This Note is not applicable to the Company.

Note 13 - Capital and Surplus, Stockholders’ Dividend Restrictions, and Quasi-Reorganizations

No change

Note 14 - Contingencies

This Note is not applicable to the Company.

Note 15 - Leases

This Note is not applicable to the Company.

Note 16 - Information about Financial Instruments with Off-balance-sheet Risk and Financial Instruments with Concentrations of Credit Risk

This Note is not applicable to the Company.

Note 17 - Sale, Transfer, and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfer of Receivables reported as Sales – None
- B. Transfer and Servicing of Financial Assets – None
- C. Wash Sales - None

Note 18 - Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans

No Change

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

This Note is not applicable to the Company.

Note 20 – Fair Value Measurements

- A. Fair Market Value at Reporting Date

- 1. Fair Value Measurements at Reporting Date

Description	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair Value				
Common Stock	\$ 10,528,100	\$ -	\$ -	\$ 10,528,100
Total Common Stock	<u>\$ 10,528,100</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 10,528,100</u>
Total Assets at Fair Value	<u>\$ 10,528,100</u>	<u>\$ -</u>	<u>-</u>	<u>10,528,100</u>
b. Total Liabilities at Fair Value				
Total Liabilities at Fair Value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

Notes to Financial Statement

- 2. Fair Value Measurements in (Level 3) of the Fair Value Hierarchy – None
- 3. The Company had no transfers between levels.
- 4. The Company has not valued any securities at a Level 2 or 3.
- 5. Derivative assets and liabilities – None

B. Fair Value information under SSAP No. 100 combined with Fair Value information Under Other Accounting Pronouncements – None

C. Aggregate Fair Value of All Financial Instruments

Type of Financial Instruments	Aggregate Fair		Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
	Value	Admitted Assets				
Bonds	79,834,906	78,953,112	-	79,834,906	-	-
Common Stock	10,528,100	10,528,100	10,528,100	-	-	-
Short-term investments	31,857,693	31,857,693	31,857,693	-	-	-
	122,220,699	121,338,905	42,385,793	79,834,906	-	-

D. Not Practicable to Estimate Fair Value – None

Note 21 - Other Items

No Change

Note 22 - Events Subsequent

This Note is not applicable to the Company.

Note 23 - Reinsurance

No change

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

E. Risk – Sharing Provisions of the Affordable Care Act (ACA)

- 1. Did the reporting entity write accident and health insurance premiums that is subject to the Affordable Care Act risk-sharing provisions (Yes/No)? Yes

The Company had zero balances for the risk corridor and risk adjustment programs due to a lack of sufficient data to estimate amounts recoverable or payable.

- 2. Impact of Risk – Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

The Company did not accrue for the Risk Adjustment user fees or the Reinsurance contributions as they were deemed to be immaterial at September 30, 2015. The Company has determined that there are no reinsurance receivables within the Transitional Reinsurance Program at this time. The Company does not have any self – insured business that would require disclosure of any uninsured plan contributions within the Transitional Reinsurance Program.

Notes to Financial Statement

		<u>AMOUNT</u>
a. Permanent ACA Risk Adjustment Program		
Assets		
1. Premium adjustments receivable due to ACA Risk Adjustment	\$	<u>0</u>
Liabilities		
2. Risk adjustment user fees payable for ACA Risk Adjustment	\$	<u>0</u>
3. Premium adjustments payable due to ACA Risk Adjustment	\$	<u>0</u>
Operations (Revenue & Expense)		
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	\$	<u>0</u>
5. Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)	\$	<u>0</u>
b. Transitional ACA Reinsurance Program		
Assets		
1. Amounts recoverable for claims paid due to ACA Reinsurance	\$	<u>0</u>
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	\$	<u>0</u>
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	\$	<u>0</u>
Liabilities		
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums	\$	<u>0</u>
5. Ceded reinsurance premiums payable due to ACA Reinsurance	\$	<u>0</u>
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$	<u>0</u>
Operations (Revenue & Expense)		
7. Ceded reinsurance premiums due to ACA Reinsurance	\$	<u>0</u>
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$	<u>0</u>
9. ACA Reinsurance contributions - not reported as ceded premium	\$	<u>0</u>
c. Temporary ACA Risk Corridors Program		
Assets		
1. Accrued retrospective premium due to ACA Risk Corridors Liability	\$	<u>0</u>
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	\$	<u>0</u>
Operations (Revenue & Expense)		
3. Effect of ACA Risk Corridors on net premium income (paid/received)	\$	<u>0</u>
4. Effect of ACA Risk Corridors on change in reserves for rate credits	\$	<u>0</u>

Notes to Financial Statement

3. Roll – forward of prior year ACA risk – sharing provisions for the following assets (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
				Prior Year Accrued Less Payments	Prior Year Accrued Less Payments	To Prior Year Balances	To Prior Year Balances	Re f	Cummulative Balance from Prior Years (Col 1-3+7)	Cummulative Balance from Prior Years (Col 2-4+8)
1	2	3	4	5	6	7	8		9	10
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)		Receivable	(Payable)
a. Premium ACA Risk Adjustment Program										
1. Premium adjustments receivable	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
2. Premium adjustments (payable)	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
3. Subtotal ACA Premanent Risk Adjustment Program	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
b. Transitional ACA Reinsurance Program										
Amounts recoverable for claims										
1. paid	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Amounts recoverable for claims										
2. unpaid (contra liability)	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Amounts receivable relating to										
3. uninsured plans	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Liabilities for contributions										
4. payable due to ACA Reinsurance - not reported as ceded premium	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Ceded reinsurance premiums										
5. payable	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Liability for amounts held under										
6. uninsured plans	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Subtotal ACA Transitional										
7. Reinsurance Program	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
c. Temporary ACA Risk Corridors Program										
1. Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
Reserve for rate credits or policy										
2. experience rating refunds	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
3. Subtotal ACA Risk Corridor Program										
d. Total for ACA Risk-Sharing Provisions	\$	\$	\$	\$	\$	\$	\$	A	\$	\$

Note 25 - Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2014 were \$198,534,685 for unpaid claims and incentives and \$1,056,000 for unpaid claims adjustment expenses. As of September 30, 2015, \$176,668,379 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. There are \$20,103,694 reserves remaining for prior years. Therefore there has been a \$1,762,612 favorable prior year development since December 31, 2014 to September 30, 2015. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes know regarding individual claims.

Note 26 - Intercompany Pooling Arrangements

This Note is not applicable to the Company.

Note 27 - Structured Settlements

This Note is not applicable to the Company.

Note 28 - Health Care Receivables

No change

Note 29 - Participating Policies

This Note is not applicable to the Company.

Note 30 - Premium Deficiency Reserves

No change

Note 31 - Anticipated Salvage and Subrogation

This Note is not applicable to the Company.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes[] No[X]
- 1.2 If yes, has the report been filed with the domiciliary state?

Yes[] No[] N/A[X]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes[] No[X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes[X] No[]
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes[] No[X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes:
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes[] No[X]
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

If yes, attach an explanation.

Yes[] No[X] N/A[]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2014
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2011
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

10/01/2012
- 6.4 By what department or departments?

State of Michigan DIFS
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes[] No[] N/A[X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with?

Yes[X] No[] N/A[]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes[] No[X]
- 7.2 If yes, give full information
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes[] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes[] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
		Yes[] No[X]	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

Yes[X] No[]
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended?

Yes[] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes[] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes[] No[X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes[] No[X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$ 0
13. Amount of real estate and mortgages held in short-term investments:

\$ 0

GENERAL INTERROGATORIES (Continued)

INVESTMENT

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

14.2 If yes, please complete the following:

Yes[] No[X]

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds		
14.22 Preferred Stock		
14.23 Common Stock		
14.24 Short-Term Investments		
14.25 Mortgages Loans on Real Estate		
14.26 All Other		
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)		
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above		

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes[] No[X]
Yes[] No[] N/A[X]

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.3 Total payable for securities lending reported on the liability page

\$ 0
\$ 0
\$ 0

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

Yes[X] No[]

1 Name of Custodian(s)	2 Custodian Address
Comerica Bank	411 W. Lafayette, Detroit, 48226
.....
.....

17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

17.4 If yes, give full and complete information relating thereto:

Yes[] No[X]

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....

17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
134261	RSW Investments	47 Maple St., Suite 304, Summit, NJ, 07901
110297	Madison Scottsdale	8777 N. Gainey Center Dr, Ste 200, Scottsdale, AZ 85258
19616	Wells Fargo Advisors	718 Notre Dame, Suite 200, Grosse Pointe, MI. 48230

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

18.2 If no, list exceptions:

Yes[X] No[]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:	
1.1 A&H loss percent	84.886%
1.2 A&H cost containment percent	0.409%
1.3 A&H expense percent excluding cost containment expenses	12.679%
2.1 Do you act as a custodian for health savings accounts?	Yes[] No[X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.	\$..... 0
2.3 Do you act as an administrator for health savings accounts?	Yes[] No[X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.	\$..... 0

SCHEDULE S - CEDED REINSURANCE
Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
Accident and Health - Non-affiliates								
11835	04-1590940	07/01/2014	PARTNERRE AMER INS CO	DE	SSL/A/I	Authorized		
13989	98-0636926	01/01/2015	SAXON RE LTD	MI	SSL/A/I	Authorized		
11835	04-1590940	07/01/2015	PARTNERRE AMER INS CO	DE	SSL/A/I	Authorized		

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS
Current Year to Date - Allocated by States and Territories

		1	Direct Business Only							
			2	3	4	5	6	7	8	9
State, Etc.		Active Status	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama (AL)	N								
2.	Alaska (AK)	N								
3.	Arizona (AZ)	N								
4.	Arkansas (AR)	N								
5.	California (CA)	N								
6.	Colorado (CO)	N								
7.	Connecticut (CT)	N								
8.	Delaware (DE)	N								
9.	District of Columbia (DC)	N								
10.	Florida (FL)	N								
11.	Georgia (GA)	N								
12.	Hawaii (HI)	N								
13.	Idaho (ID)	N								
14.	Illinois (IL)	N								
15.	Indiana (IN)	L	819,114						819,114	
16.	Iowa (IA)	N								
17.	Kansas (KS)	N								
18.	Kentucky (KY)	L	651,780						651,780	
19.	Louisiana (LA)	N								
20.	Maine (ME)	N								
21.	Maryland (MD)	N								
22.	Massachusetts (MA)	N								
23.	Michigan (MI)	L	1,243,059	68,057,369	1,428,332,494				1,497,632,922	
24.	Minnesota (MN)	N								
25.	Mississippi (MS)	N								
26.	Missouri (MO)	N								
27.	Montana (MT)	N								
28.	Nebraska (NE)	N								
29.	Nevada (NV)	N								
30.	New Hampshire (NH)	N								
31.	New Jersey (NJ)	N								
32.	New Mexico (NM)	N								
33.	New York (NY)	N								
34.	North Carolina (NC)	N								
35.	North Dakota (ND)	N								
36.	Ohio (OH)	L	1,339,746						1,339,746	
37.	Oklahoma (OK)	N								
38.	Oregon (OR)	N								
39.	Pennsylvania (PA)	N								
40.	Rhode Island (RI)	N								
41.	South Carolina (SC)	N								
42.	South Dakota (SD)	N								
43.	Tennessee (TN)	N								
44.	Texas (TX)	N								
45.	Utah (UT)	N								
46.	Vermont (VT)	N								
47.	Virginia (VA)	N								
48.	Washington (WA)	N								
49.	West Virginia (WV)	N								
50.	Wisconsin (WI)	N								
51.	Wyoming (WY)	N								
52.	American Samoa (AS)	N								
53.	Guam (GU)	N								
54.	Puerto Rico (PR)	N								
55.	U.S. Virgin Islands (VI)	N								
56.	Northern Mariana Islands (MP)	N								
57.	Canada (CAN)	N								
58.	Aggregate other alien (OT)	X X X								
59.	Subtotal	X X X	4,053,699	68,057,369	1,428,332,494				1,500,443,562	
60.	Reporting entity contributions for Employee Benefit Plans	X X X								
61.	Total (Direct Business)	(a)..... 4	4,053,699	68,057,369	1,428,332,494				1,500,443,562	
DETAILS OF WRITE-INS										
58001.	.....	X X X								
58002.	.....	X X X								
58003.	.....	X X X								
58998.	Summary of remaining write-ins for Line 58 from overflow page	X X X								
58999.	TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	X X X								

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER
MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

Caidan Enterprises, Inc. (MI; Federal Employer Identification # 52-2422207)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

D. Cotton, MD	34.47%
S. Cotton	33.61%
J. Cotton	10.64% - Non Voting Stock
S.P. Cotton	10.64% - Non Voting Stock
M. Cotton	10.64% - Non Voting Stock

Caidan Management Company, LLC (MI; Federal Employer Identification # 26-4004494)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Enterprises, Inc.	100%
--------------------------	------

Meridian Rx, LLC (MI; Federal Employer Identification # 27-1339224)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Enterprises, Inc.	100%
--------------------------	------

Health Management, Inc. (MI; Federal Employer Identification # 38-3360283)

(common ownership with Caidan Enterprises, Inc. majority shareholder)

Organization Governance and Ownership Structure:

Equity Shareholders

Shareholders at September 30, 2015:

D. Cotton, MD	100%
---------------	------

Caidan Holding Company, Inc. (MI; Federal Employer Identification # 26-4004578)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Enterprises, Inc.	100%
--------------------------	------

Meridian Health Plan of Michigan, Inc. (MI; NAIC # 52563; Federal Employer Identification # 38-3253977)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Holding Company, Inc.	100%
------------------------------	------

Meridian Health Plan of Illinois, Inc. (IL; NAIC # 13189; Federal Employer Identification # 20-3209671)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Holding Company, Inc.	100%
------------------------------	------

Meridian Health Plan of Iowa, Inc. (IA; NAIC # 14145; Federal Employer Identification # 45-1749180)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Holding Company, Inc.	100%
------------------------------	------

Granite Care - Meridian Health Plan of New Hampshire, Inc. (NH; NAIC # 14228; Federal Employer Identification # 36-4717033)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at September 30, 2015:

Caidan Holding Company, Inc.	100%
------------------------------	------

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domic- iliary Loca- tion	Rela- tion- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	*
.....	.....	00000	52-2422207	.....	.....	.....	Caidan Enterprises, Inc. ....	.. MI ..	... UIP ..	David B. Cotton	Ownership, Board of Directors .....	..... 34.5	David B. Cotton .....	.....
.....	.....	00000	26-4004578	.....	.....	.....	Caidan Holding Company, Inc. ....	.. MI ..	... UDP ..	Caidan Enterprises, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....
.....	.....	0000	26-4004494	.....	.....	.....	Caidan Management Company, LLC .....	.. MI ..	... NIA ..	Caidan Enterprises, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....
.....	.....	0000	38-3360283	.....	.....	.....	Health Management, Inc .....	.. MI ..	... NIA ..	David B. Cotton	Ownership .....	..... 100.0	David B. Cotton .....	.....
.....	.....	00000	27-1339224	.....	.....	.....	MeridianRx, LLC .....	.. MI ..	... NIA ..	Caidan Enterprises, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....
4640 ..	Caidan Enterprises Inc Grp ...	13189	20-3209671	.....	.....	.....	Meridian Health Plan of Illinois, Inc .....	.. IL ..	... IA ..	Caidan Holding Company, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....
4640 ..	Caidan Enterprises Inc Grp ...	14145	45-1749180	.....	.....	.....	Meridian Health Plan of Iowa, Inc .....	.. IA ..	... IA ..	Caidan Holding Company, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....
4640 ..	Caidan Enterprises Inc Grp ...	14228	36-4717033	.....	.....	.....	Granite Care - Meridian Health Plan of New Hampshire, Inc .....	.. NH ..	... IA ..	Caidan Holding Company, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....
4640 ..	Caidan Enterprises Inc Grp ...	52563	38-3253977	.....	.....	.....	Meridian Health Plan of Michigan, Inc. ....	.. MI ..	... RE ..	Caidan Holding Company, Inc.	Ownership .....	..... 100.0	David B. Cotton .....	.....

916

Asterisk	Explanation
0000001	.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	Yes

Explanations:

Bar Codes:

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1197. Summary of remaining write-ins for Line 11 (Lines 1104 through 1196)
2504.
2597. Summary of remaining write-ins for Line 25 (Lines 2504 through 2596)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
4704.
4705. 0
4797. Summary of remaining write-ins for Line 47 (Lines 4704 through 4796)

STATEMENT AS OF **September 30, 2015** OF THE **Meridian Health Plan of Michigan, Inc.**

SCHEDULE A - VERIFICATION

Real Estate		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired		
2.1	Actual cost at time of acquisition		
2.2	Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other than temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition		
2.2	Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest points		
9.	Total foreign exchange change in book value/recorded investment		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	1,555,575	1,555,575
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition		
2.2	Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals	39,098	
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)	1,516,477	1,555,575
12.	Deduct total nonadmitted amounts	1,290,211	1,329,309
13.	Statement value at end of current period (Line 11 minus Line 12)	226,266	226,266

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	64,655,841	63,322,921
2.	Cost of bonds and stocks acquired	49,223,064	28,562,949
3.	Accrual of discount	10,195	(6,514)
4.	Unrealized valuation increase (decrease)	(663,983)	(1,391,801)
5.	Total gain (loss) on disposals	113,888	960,352
6.	Deduct consideration for bonds and stocks disposed of	23,095,742	26,004,670
7.	Deduct amortization of premium	762,051	787,396
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	89,481,212	64,655,841
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	89,481,212	64,655,841

SCHEDULE D - PART 1B
Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	91,221,810	35,830,239	32,016,156	(1,354,050)	64,874,772	91,221,810	93,681,843	61,828,384
2. NAIC 2 (a)	17,230,193	2,939,780	3,962,418	921,407	12,662,142	17,230,193	17,128,962	16,239,918
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	108,452,003	38,770,019	35,978,574	(432,643)	77,536,914	108,452,003	110,810,805	78,068,302
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	108,452,003	38,770,019	35,978,574	(432,643)	77,536,914	108,452,003	110,810,805	78,068,302

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....14,284,218; NAIC 2 \$.....13,493,699; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DA - PART 1

Short - Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals	31,857,693	X X X	32,031,505	244,171	159,124

SCHEDULE DA - Verification

Short-Term Investments

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	24,591,344	24,148,391
2.	Cost of short-term investments acquired	101,717,193	74,167,020
3.	Accrual of discount	73	
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	7,494	348
6.	Deduct consideration received on disposals	94,065,073	73,019,137
7.	Deduct amortization of premium	393,338	705,278
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	31,857,693	24,591,344
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	31,857,693	24,591,344

SI04 Schedule DB - Part A Verification NONE

SI04 Schedule DB - Part B Verification NONE

SI05 Schedule DB Part C Section 1 NONE

SI06 Schedule DB Part C Section 2 NONE

SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

		Book/Adjusted Carrying Value Check	
1.	Part A, Section 1, Column 14 .....	.....
2.	Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance .....	.....
3.	Total (Line 1 plus Line 2) .....		.....
4.	Part D, Section 1, Column 5 .....	.....
5.	Part D, Section 1, Column 6 .....	.....
6.	Total (Line 3 minus Line 4 minus Line 5) .....		.....

		Fair Value Check	
7.	Part A, Section 1, Column 16 .....	.....
8.	Part B, Section 1, Column 13 .....	.....
9.	Total (Line 7 plus Line 8) .....		.....
10.	Part D, Section 1, Column 8 .....	.....
11.	Part D, Section 1, Column 9 .....	.....
12.	Total (Line 9 minus Line 10 minus Line 11) .....		.....

		Potential Exposure Check	
13.	Part A, Section 1, Column 21 .....	.....
14.	Part B, Section 1, Column 20 .....	.....
15.	Part D, Section 1, Column 11 .....	.....
16.	Total (Line 13 plus Line 14 minus Line 15) .....		.....

SCHEDULE E - Verification
(Cash Equivalents)

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year .....	.....	.....
2.	Cost of cash equivalents acquired .....	.....	.....
3.	Accrual of discount .....	.....	.....
4.	Unrealized valuation increase (decrease) .....	.....	.....
5.	Total gain (loss) on disposals .....	.....	.....
6.	Deduct consideration received on disposal .....	.....	.....
7.	Deduct amortization of premium .....	.....	.....
8.	Total foreign exchange change in book value .....	.....	.....
9.	Deduct current year's other than temporary impairment recognized .....	.....	.....
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) .....	.....	.....
11.	Deduct total nonadmitted amounts .....	.....	.....
12.	Statement value at end of current period (Line 10 minus Line 11) .....	.....	.....

NONE

E01 Schedule A Part 2 NONE

E01 Schedule A Part 3 NONE

E02 Schedule B Part 2 NONE

E02 Schedule B Part 3 NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1 CUSIP Identification	2 Name or Description	Location		5 Name of Vendor or General Partner	6 NAIC Designation	7 Date Originally Acquired	8 Type and Strategy	9 Actual Cost at Time of Acquisition	10 Additional Investment Made After Acquisition	11 Amount of Encumbrances	12 Commitment for Additional Investment	13 Percentage of Ownership
		3 City	4 State									
<div>NONE</div>												
4699999 TOTALS X X X ...

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2	Location		5	6	7	8	Change in Book/Adjusted Carrying Value						15	16	17	18	19	20
		3	4					9	10	11	12	13	14						
CUSIP Identification	Name or Description	City	State	Name of Purchaser or Nature of Disposal	Date Originally Acquired	Disposal Date	Book/Adjusted Carrying Value Less Encumbrances, Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Depreciation) or (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in B./A.C.V. (9 + 10 - 11 + 12)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Investment Income
Non-collateral Loans - Unaffiliated																			
Loan Receivable					05/31/2012										39,098				
2799999 Subtotal - Non-collateral Loans - Unaffiliated															39,098				
4499999 Total - Unaffiliated															39,098				
4599999 Total - Affiliated																			
4699999 TOTALS															39,098				

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments									
38376YXA4	GNMA REMIC TRUST 2010-43		08/27/2015	UBS	X X X	1,186,537	1,153,378	2,883	1
38378KHD4	GNMA REMIC TRUST 2013-55		07/10/2015	UBS	X X X	992,597	1,004,526	617	1
38379KEU8	GNMA REMIC TRUST 2015-33		09/22/2015	UBS	X X X	686,479	674,672	1,192	1
38379JH61	GNMA REMIC TRUST 2015-36		09/22/2015	UBS	X X X	2,079,646	2,036,373	3,253	1
0599999 Subtotal - Bonds - U.S. Governments					X X X	4,945,259	4,868,949	7,945	X X X
Bonds - U.S. Political Subdivisions of States, Territories and Possessions									
180848HX4	CLARK CNTY NEV FOR ISSUES DTD		07/10/2015	UBS	X X X	1,166,530	1,000,000	2,411	1FE
181059PM2	CLARK CNTY NEV SCH DIST FOR IS		07/15/2015	UBS	X X X	670,048	610,000	2,965	1FE
2499999 Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					X X X	1,836,578	1,610,000	5,376	X X X
Bonds - U.S. Special Revenue, Special Assessment									
235241JM9	DALLAS TEX AREA RAPID TRAN SAL		09/01/2015	UBS	X X X	327,065	290,000	3,665	1FE
235241LT1	DALLAS TEX AREA RAPID TRAN SAL		09/21/2015	UBS	X X X	2,025,990	1,800,000	35,307	1FE
254845GB0	DISTRICT COLUMBIA WTR & SWR AU		09/01/2015	UBS	X X X	319,801	285,000	6,056	1FE
3134G7MS7	FEDERAL HOME LN MTG CORP		07/17/2015	UBS	X X X	1,500,000	1,500,000	1	1
3134G7UZ2	FEDERAL HOME LN MTG CORP		09/03/2015	UBS	X X X	1,000,000	1,000,000	1	1
3130A6K55	FEDERAL HOME LOAN BANKS		09/29/2015	UBS	X X X	750,000	750,000	1	1
3136G2NZ6	FEDERAL NATL MTG ASSN		09/30/2015	UBS	X X X	2,000,000	2,000,000	1	1
3137AEGA7	FHLMC REMIC SERIES 3903		07/01/2015	UBS	X X X	692,856	680,104	312	1
3137AQXM5	FHLMC REMIC SERIES 4058		08/21/2015	UBS	X X X	700,386	669,026	1,626	1
649902SQ7	NEW YORK ST DORM AUTH ST PERS		07/24/2015	UBS	X X X	421,871	375,000	6,979	1FE
67755CXZ7	OHIO ST BLDG AUTH		09/08/2015	UBS	X X X	285,618	255,000	5,667	1FE
684515QB8	ORANGE CNTY FLA SALES TAX REV		07/24/2015	UBS	X X X	525,227	465,000	1,679	1FE
70917RVT9	PENNSYLVANIA ST HIGHER EDL FAC		07/24/2015	UBS	X X X	1,775,529	1,575,000	9,625	1FE
80330QCH6	SARASOTA CNTY FLA SCH BRD CTFS		07/24/2015	UBS	X X X	258,766	225,000	875	1FE
3199999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment					X X X	12,583,109	11,869,130	71,791	X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)									
60688MPP3	MIZUHO BK USA INSTL CTF DEP		08/10/2015	UBS	X X X	249,000	249,000	1	1
03784JLP7	APPLE BK FOR SVGS N Y		08/10/2015	UBS	X X X	249,000	249,000	1	1
254672UA4	DISCOVER BK		08/10/2015	UBS	X X X	249,000	249,000	1	1
78658QPU1	SAFRA NATL BK NEW YORK CTF DEP P		08/10/2015	UBS	X X X	249,000	249,000	1	1
3899999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					X X X	996,000	996,000	1	X X X
8399997 Subtotal - Bonds - Part 3					X X X	20,360,946	19,344,079	85,112	X X X
8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly)					X X X	X X X	X X X	X X X	X X X
8399999 Subtotal - Bonds					X X X	20,360,946	19,344,079	85,112	X X X
8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)					X X X	X X X	X X X	X X X	X X X
Common Stocks - Mutual Funds									
09251T509	BLACKROCK GLB ALLOCATION FD		07/17/2015	UBS	642.105	13,202	X X X	1	L
9299999 Subtotal - Common Stocks - Mutual Funds					X X X	13,202	X X X	1	X X X
9799997 Subtotal - Common Stocks - Part 3					X X X	13,202	X X X	1	X X X
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					X X X	X X X	X X X	X X X	X X X
9799999 Subtotal - Common Stocks					X X X	13,202	X X X	1	X X X
9899999 Subtotal - Preferred and Common Stocks					X X X	13,202	X X X	1	X X X
9999999 Total - Bonds, Preferred and Common Stocks					X X X	20,374,148	X X X	85,112	X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

QE05

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of
During the Current Quarter

CUSIP Identification	Description	3 F o r e i g n Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)	
									11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amortization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11 + 12 - 13)	15 Total Foreign Exchange Change in B./A.C.V.								
Bonds - U.S. Governments																					
36296DJ82	GNMA PASS-THRU X SINGLE FAMILY	09/15/2015	PRINCIPAL RECEIPT	X X X	3,689	3,689	3,867	3,927	(239)		(239)		3,689				140	10/15/2023	1		
36296JCV5	GNMA PASS-THRU X SINGLE FAMILY	09/15/2015	PRINCIPAL RECEIPT	X X X	5,690	5,690	5,880	5,882	(192)		(192)		5,690				194	08/15/2039	1		
36297FSV5	GNMA PASS-THRU X SINGLE FAMILY	09/15/2015	PRINCIPAL RECEIPT	X X X	2,303	2,303	2,395	2,374	(72)		(72)		2,303				69	08/15/2024	1		
38378ND91	GNMA REMIC TRUST	09/16/2015	PRINCIPAL RECEIPT	X X X	13,473	13,473	13,603	13,611	(138)		(138)		13,473				187	08/16/2039	1		
38373SW78	GNMA REMIC TRUST 2003-35	09/16/2015	PRINCIPAL RECEIPT	X X X	2,709	2,709	2,736	2,732	(24)		(24)		2,709				80	03/16/2033	1		
38373MR51	GNMA REMIC TRUST 2008-14	09/16/2015	PRINCIPAL RECEIPT	X X X	1,301	1,301	1,362	1,344	(43)		(43)		1,301				46	12/16/2042	1		
38377JDZ3	GNMA REMIC TRUST 2010-109	09/22/2015	PRINCIPAL RECEIPT	X X X	48,174	48,174	49,725	49,577	(1,403)		(1,403)		48,174				877	12/20/2037	1		
38377JZM8	GNMA REMIC TRUST 2010-125	09/22/2015	PRINCIPAL RECEIPT	X X X	10,264	10,264	10,593	10,435	(171)		(171)		10,264				238	04/20/2039	1		
38377MH82	GNMA REMIC TRUST 2010-147	09/22/2015	PRINCIPAL RECEIPT	X X X	48,767	48,767	50,032		(1,265)		(1,265)		48,767				442	05/20/2040	1		
38376YXA4	GNMA REMIC TRUST 2010-43	09/22/2015	PRINCIPAL RECEIPT	X X X	39,144	39,144	40,269		(1,125)		(1,125)		39,144				98	02/20/2039	1		
38377JPQ0	GNMA REMIC TRUST 2010-98	09/22/2015	PRINCIPAL RECEIPT	X X X	6,554	6,554	7,378	6,927	(373)		(373)		6,554				197	09/20/2021	1		
38378BEF2	GNMA REMIC TRUST 2012-28	09/16/2015	PRINCIPAL RECEIPT	X X X	5,498	5,498	5,501		(3)		(3)		5,498				50	10/16/2038	1		
38375CWQ9	GNMA REMIC TRUST 2012-43	09/22/2015	PRINCIPAL RECEIPT	X X X	13,445	13,445	14,153	13,982	(536)		(536)		13,445				272	07/20/2039	1		
38378J2R2	GNMA REMIC TRUST 2013-41	09/22/2015	PRINCIPAL RECEIPT	X X X	64,987	64,987	64,337		650		650		64,987				174	01/20/2041	1		
38378KGG8	GNMA REMIC TRUST 2013-52	09/16/2015	PRINCIPAL RECEIPT	X X X	16,564	16,564	16,233		331		331		16,564				32	06/16/2038	1		
38378KHD4	GNMA REMIC TRUST 2013-55	09/16/2015	PRINCIPAL RECEIPT	X X X	5,202	5,202	5,140		62		62		5,202				10	12/16/2042	1		
831641EZ4	SMALL BUSINESS ADMIN GTD PTNCT	09/01/2015	CALLED @ 100.0000000	X X X	30,458	30,458	32,090	30,458					30,458				567	09/10/2023	1		
0599999 Subtotal - Bonds - U.S. Governments				X X X	318,222	318,222	325,294	141,249	(4,541)		(4,541)		318,222				3,673	X X X	X X X		
Bonds - U.S. States, Territories and Possessions																					
34153PUK2	FLORIDA ST BRD ED PUB ED	09/01/2015	UBS	X X X	216,692	185,000	220,648		(3,498)		(3,498)		217,150		(457)	(457)	7,015	06/01/2025	1FE		
93974DKH0	WASHINGTON ST FOR ISSUES DTD P	08/18/2015	UBS	X X X	351,186	300,000	348,192		(893)		(893)		347,299		3,887	3,887	9,583	07/01/2030	1FE		
1799999 Subtotal - Bonds - U.S. States, Territories and Possessions				X X X	567,878	485,000	568,840		(4,391)		(4,391)		564,449		3,430	3,430	16,598	X X X	X X X		
Bonds - U.S. Special Revenue, Special Assessment																					
3128PES33	FED HOME LN MTG	09/15/2015	PRINCIPAL RECEIPT	X X X	764	764	818	767	(3)		(3)		764				31	08/01/2016	1		
313466H89	FEDERAL HOME LN MTG CORP	08/28/2015	CALLED @ 100.0000000	X X X	1,000,000	1,000,000	999,700		60		60		999,760		240	240	2,500	05/28/2020	1		
31283KWN4	FEDERAL HOME LN MTG CORP POOL #G1	09/15/2015	PRINCIPAL RECEIPT	X X X	3,579	3,579	3,621	3,601	(22)		(22)		3,579				121	04/01/2019	1		
31335HVE0	FEDERAL HOME LOAN 90613 5% 1/2023	09/15/2015	PRINCIPAL RECEIPT	X X X	830	830	885	799	31		31		830				27	01/01/2023	1		
3130A2TC0	FEDERAL HOME LOAN BANKS	08/27/2015	CALLED @ 100.0000000	X X X	500,000	500,000	500,000	500,000					500,000				2,344	11/27/2018	1		
3130A5GF0	FEDERAL HOME LOAN BANKS	09/18/2015	CALLED @ 100.0000000	X X X	1,500,000	1,500,000	1,500,000						1,500,000				1,875	06/18/2020	1		
3136G1G37	FEDERAL NATL MTG ASSN	09/21/2015	CALLED @ 100.0000000	X X X	1,000,000	1,000,000	998,000	1,000,000					1,000,000				30,000	03/20/2028	1		
3136G1GB9	FEDERAL NATL MTG ASSN CALL STEP 03	09/21/2015	CALLED @ 100.0000000	X X X	1,000,000	1,000,000	998,500	1,000,000					1,000,000				30,000	03/20/2028	1		
3136A9AZ1	FEDERAL NATL MTG ASSN GTD REMIC	09/25/2015	PRINCIPAL RECEIPT	X X X	15,161	15,161	15,315	15,359	(198)		(198)		15,161				196	06/25/2042	1		
31395AX83	FHLMC MULTICLASS PREASSIGN 4.5	09/15/2015	PRINCIPAL RECEIPT	X X X	13,349	13,349	14,146	13,616	(267)		(267)		13,349				400	07/15/2019	1		
3128PNCB9	FHLMC PC GOLD 15 YR	09/15/2015	PRINCIPAL RECEIPT	X X X	823	822	844	847	(24)		(24)		823				26	06/01/2024	1		
3128MCGH2	FHLMC PC GOLD COMB 15	09/15/2015	PRINCIPAL RECEIPT	X X X	1,948	1,948	1,995	1,993	(46)		(46)		1,948				57	06/01/2024	1		
3128MMXK0	FHLMC PC GOLD COMB 15	09/15/2015	PRINCIPAL RECEIPT	X X X	2,187	2,187	2,244	2,253	(66)		(66)		2,187				67	05/01/2024	1		
3128KQD78	FHLMC PC GOLD COMB 30	09/15/2015	PRINCIPAL RECEIPT	X X X	1,914	1,914	2,006	2,035	(121)		(121)		1,914				72	05/01/2037	1		
31297H4M8	FHLMC PC GOLD COMB 30	09/15/2015	PRINCIPAL RECEIPT	X X X	6,745	6,745	6,884	7,034	(289)		(289)		6,745				208	02/01/2035	1		
31297VY69	FHLMC PC GOLD COMB 30	09/15/2015	PRINCIPAL RECEIPT	X X X	1,713	1,713	1,748	1,764	(51)		(51)		1,713				52	11/01/2035	1		
31394GU92	FHLMC REMIC SERIES 2666	09/15/2015	PRINCIPAL RECEIPT	X X X	5,725	5,725	6,097	6,035	(311)		(311)		5,725				172	08/15/2023	1		
31398QP66	FHLMC REMIC SERIES 3679	09/15/2015	PRINCIPAL RECEIPT	X X X	65,522	65,522	67,487	67,479	(1,957)		(1,957)		65,522				1,093	05/15/2020	1		
3137A8LB9	FHLMC REMIC SERIES 3819	09/15/2015	PRINCIPAL RECEIPT	X X X	6,477	6,477	6,602	6,558	(81)		(81)		6,477				107	11/15/2018	1		
3137AAGA5	FHLMC REMIC SERIES 3857	09/15/2015	PRINCIPAL RECEIPT	X X X	141,114	141,114	145,788		(4,674)		(4,674)		141,114				688	05/15/2040	1		
3137AEGA7	FHLMC REMIC SERIES 3903	09/15/2015	PRINCIPAL RECEIPT	X X X	37,411	37,411	38,112		(701)		(701)		37,411				123	03/15/2041	1		
3137AH4V7	FHLMC REMIC SERIES 3936	09/15/2015	PRINCIPAL RECEIPT	X X X	13,176	13,176	13,143	13,151	25		25		13,176				131	03/15/2026	1		
3137AFWS7	FHLMC REMIC SERIES 3944	09/15/2015	PRINCIPAL RECEIPT	X X X	6,527	6,527	6,611	6,560	(33)		(33)		6,527				109	07/15/2022	1		
3137AKAW1	FHLMC REMIC SERIES 3982	09/15/2015	PRINCIPAL RECEIPT	X X X	69,044	69,044	69,842		(798)		(798)		69,044				473	10/15/2038	1		
3137ALT58	FHLMC REMIC SERIES 3996	09/15/2015	PRINCIPAL RECEIPT	X X X	68,249	68,249	71,193		(2,943)		(2,943)		68,249				726	11/15/2038	1		
3137APKC3	FHLMC REMIC SERIES 4030	09/15/2015	PRINCIPAL RECEIPT	X X X	7,839	7,839	7,879	7,866	(26)		(26)		7,839				104	02/15/2041	1		
3137AQXM5	FHLMC REMIC SERIES 4058	09/15/2015	PRINCIPAL RECEIPT	X X X	13,455	13,455	14,086		(631)		(631)		13,455				39	08/15/2030	1		
3137AWB95	FHLMC REMIC SERIES 4135	09/15/2015	PRINCIPAL RECEIPT	X X X	10,374	10,374	10,408	10,403	(29)		(29)		10,374				95	11/15/2027	1		
3137B2ZH6	FHLMC REMIC SERIES 4221	09/15/2015	PRINCIPAL RECEIPT	X X X	50,985	50,985	51,224	51,213	(228)		(228)		50,985				514	07/15/2023	1		
31371MBN6	FNMA 255745 5.5% 5/2025	09/25/2015	PRINCIPAL RECEIPT	X X X	1,115	1,115	1,247	1,099	16		16		1,115				40	05/01/2025	1		
31402BXE9	FNMA PASS-THRU INT 15 YEAR	09/25/2015	PRINCIPAL</																		

QE05.1

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of

During the Current Quarter

1	2	3 F o r e i g n	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description		Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
31371LCD9	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	1,495	1,495	1,533	1,538		(43)		(43)		1,495				50	09/01/2033	1
31402CVZ2	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	4,812	4,812	4,922	4,936		(124)		(124)		4,812				160	03/01/2034	1
31402DMP2	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	2,173	2,173	2,207	2,213		(40)		(40)		2,173				65	09/01/2034	1
31403C6L0	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	2,343	2,343	2,399	2,409		(66)		(66)		2,343				77	02/01/2036	1
31403DDX4	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	2,039	2,039	2,136	2,164		(125)		(125)		2,039				74	04/01/2036	1
31414PZM4	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	916	916	960	1,005		(88)		(88)		916				39	03/01/2038	1
31416RFA6	FNMA PASS-THRU LNG 30 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	3,380	3,380	3,398	3,404		(24)		(24)		3,380				96	01/01/2034	1
31418AXG8	FNMA PASS-THRU SHRT 10 YEAR		09/25/2015	PRINCIPAL RECEIPT	X X X	61,584	61,584	64,336	64,336	(2,753)			(2,753)		61,584			1,238	09/01/2023	1	
31371KSH5	FNMA POOL #254420 6% DUE 07-01-20		09/25/2015	PRINCIPAL RECEIPT	X X X	2,644	2,644	2,723	2,716		(72)		(72)		2,644			106	07/01/2022	1	
31371LHE2	FNMA POOL #255029 5% 12-01-2023 B		09/25/2015	PRINCIPAL RECEIPT	X X X	2,450	2,450	2,458	2,457		(6)		(6)		2,450			82	12/01/2023	1	
31371NU45	FNMA POOL #257203 5% DUE 05-01-20		09/25/2015	PRINCIPAL RECEIPT	X X X	1,056	1,056	1,050	1,048		8		8		1,056			35	05/01/2028	1	
31402RA41	FNMA POOL #735427 4 5% 12-01-2018		09/25/2015	PRINCIPAL RECEIPT	X X X	2,848	2,848	2,837	2,843		6		6		2,848			85	12/01/2018	1	
31412QWA3	FNMA POOL #932241 4% 12-01-2019 B		09/25/2015	PRINCIPAL RECEIPT	X X X	2,958	2,958	3,054	3,020		(62)		(62)		2,958			78	12/01/2019	1	
31394DEB8	FNMA REMIC TRUST 2005-22		09/25/2015	PRINCIPAL RECEIPT	X X X	10,626	10,626	11,058	10,677		(51)		(51)		10,626			354	10/25/2033	1	
31396QZS1	FNMA REMIC TRUST 2009-70		09/25/2015	PRINCIPAL RECEIPT	X X X	3,455	3,455	3,487	3,472		(17)		(17)		3,455			69	08/25/2019	1	
3136A1BN4	FNMA REMIC TRUST 2011-103		09/25/2015	PRINCIPAL RECEIPT	X X X	33,987	33,987	34,921	34,829		(842)		(842)		33,987			566	11/25/2029	1	
31397SZ80	FNMA REMIC TRUST 2011-37		09/25/2015	PRINCIPAL RECEIPT	X X X	156,737	156,737	163,399	161,856		(5,119)		(5,119)		156,737			4,548	01/25/2028	1	
31397QKB3	FNMA REMIC TRUST 2011-8		09/25/2015	PRINCIPAL RECEIPT	X X X	4,474	4,474	4,865	4,634		(159)		(159)		4,474			119	12/25/2023	1	
3136A4E88	FNMA REMIC TRUST 2012-17		09/25/2015	PRINCIPAL RECEIPT	X X X	13,090	13,090	13,147	13,121		(31)		(31)		13,090			174	07/25/2039	1	
3136AH7E4	FNMA REMIC TRUST 2014-21		09/25/2015	PRINCIPAL RECEIPT	X X X	47,482	47,482	47,793	47,776		(294)		(294)		47,482			547	04/25/2029	1	
41981CGH7	HAWAII ST HWY REV		07/01/2015	CALLED @ 100.0000000	X X X	400,000	400,000	447,636	408,848		(8,848)		(8,848)		400,000			20,000	07/01/2018	1FE	
64972HDD1	NEW YORK N Y CITY TRANSITIONAL		07/24/2015	UBS	X X X	366,718	345,000	380,062	366,872		(5,969)		(5,969)		360,904		5,814	5,814	17,921	01/15/2019	1FE
876443HL9	TARRANT REGL WTR DIST TEX WTR		08/18/2015	UBS	X X X	342,324	300,000	348,537		(2,666)			(2,666)		345,871		(3,547)	(3,547)	7,083	03/01/2031	1FE
916672NF1	UPPER TRINITY REGL WTR DIST TE		08/03/2015	CALLED @ 100.0000000	X X X	450,000	450,000	498,195	459,889		(9,889)		(9,889)		450,000				22,500	08/01/2020	1FE
92817SGU6	VIRGINIA ST PUB SCH AUTH REV		07/24/2015	UBS	X X X	78,240	70,000	79,533		(1,439)			(1,439)		78,094		145	145	3,481	08/01/2020	1FE
3199999	Subtotal - Bonds - U.S. Special Revenue, Special Assessment				X X X	7,557,830	7,485,547	7,697,224	4,340,601		(52,211)		(52,211)		7,555,177		2,652	2,652	152,326	X X X	X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
15200MAA5	CENTERPOINT ENERGY COMP 2008-3		08/01/2015	PRINCIPAL RECEIPT	X X X	13,731	13,731	14,314	13,863		(131)		(131)		13,731				579	02/01/2020	1FE
25459HAY1	DIRECTV HOLDINGS SR NT 3.5%		09/14/2015	CALLED @ 101.4025440	X X X	253,506	250,000	258,598	252,519		(1,508)		(1,508)		251,011		2,496	2,496	9,066	03/01/2016	2FE
92976GAA9	WACHOVIA BK NATL ASSN MTN SUB		08/15/2015	MATURITY	X X X	205,000	205,000	224,182	208,730		(3,730)		(3,730)		205,000				10,250	08/15/2015	1FE
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				X X X	472,237	468,731	497,094	475,112		(5,369)		(5,369)		469,742		2,496	2,496	19,895	X X X	X X X
8399997	Subtotal - Bonds - Part 4				X X X	8,916,167	8,757,500	9,088,452	4,956,962		(66,512)		(66,512)		8,907,590		8,578	8,578	192,492	X X X	X X X
8399998	Summary Item from Part 5 for Bonds (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
8399999	Subtotal - Bonds				X X X	8,916,167	8,757,500	9,088,452	4,956,962		(66,512)		(66,512)		8,907,590		8,578	8,578	192,492	X X X	X X X
8999998	Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9799998	Summary Item from Part 5 for Common Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9899999	Subtotal - Preferred and Common Stocks				X X X	X X X	X X X	X X X	X X X						X X X				X X X	X X X	X X X
9999999	Total - Bonds, Preferred and Common Stocks				X X X	8,916,167	X X X	9,088,452	4,956,962		(66,512)		(66,512)		8,907,590		8,578	8,578	192,492	X X X	X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

E06 Schedule DB Part A Section 1 NONE

E07 Schedule DB Part B Section 1 NONE

E08 Schedule DB Part D Section 1 NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE

E10 Schedule DL - Part 1 - Securities Lending Collateral Assets NONE

E11 Schedule DL - Part 2 - Securities Lending Collateral Assets NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1			2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	
Depository			Code	Rate of Interest			First Month	Second Month	Third Month	*
open depositories										
JP Morgan Chase, Detroit, MI	Concentration Account				13,306		191,701,154	196,552,802	193,275,544	X X X
Comerica Bank, Detroit, MI	General Account						458,349	480,840	517,618	X X X
										X X X
										X X X
										X X X
0199998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories			X X X	X X X						X X X
0199999 Totals - Open Depositories			X X X	X X X	13,306		192,159,503	197,033,642	193,793,162	X X X
0299998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories			X X X	X X X						X X X
0299999 Totals - Suspended Depositories			X X X	X X X						X X X
0399999 Total Cash On Deposit			X X X	X X X	13,306		192,159,503	197,033,642	193,793,162	X X X
0499999 Cash in Company's Office			X X X	X X X	X X X	X X X				X X X
0599999 Total Cash			X X X	X X X	13,306		192,159,503	197,033,642	193,793,162	X X X

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
<div>NONE</div>							
8699999 Total - Cash Equivalents



MEDICARE PART D COVERAGE SUPPLEMENT
(Net of Reinsurance)

NAIC Group Code: 4640

NAIC Company Code: 52563

		Individual Coverage		Group Coverage		5
		1 Insured	2 Uninsured	3 Insured	4 Uninsured	Total Cash
1.	Premiums Collected	2,382,438	X X X		X X X	2,382,438
2.	Earned Premiums	3,990,051	X X X		X X X	X X X
3.	Claims Paid	4,019,210	X X X		X X X	4,019,210
4.	Claims Incurred	4,278,371	X X X		X X X	X X X
5.	Reinsurance Coverage and Low Income Cost Sharing - Claims Paid Net of Reimbursements Applied (a)	X X X	5,922,870	X X X		5,922,870
6.	Aggregate Policy Reserves - change		X X X		X X X	X X X
7.	Expenses Paid	863,863	X X X		X X X	863,863
8.	Expenses Incurred		X X X		X X X	X X X
9.	Underwriting Gain or Loss	(288,320)	X X X		X X X	X X X
10.	Cash Flow Results	X X X	X X X	X X X	X X X	(8,423,505)

(a) Uninsured Receivable/Payable with CMS at End of Quarter: \$.....13,351,925 due from CMS or \$.....0 due to CMS

**INDEX TO HEALTH
QUARTERLY STATEMENT**

Accounting Changes and Corrections of Errors; Q10, Note 2; Q11

Accounting Practices and Policies; Q5; Q10, Note 1

Admitted Assets; Q2

Bonds; Q2; Q6; Q11.1; Q11.2; QE04; QE05

Bonuses; Q3; Q4; Q8; Q9

Borrowed Funds; Q3; Q6

Business Combinations and Goodwill; Q10, Note 3

Capital Gains (Losses)

 Realized; Q4

 Unrealized; Q4; Q5

Capital Stock; Q3; Q10, Note 13

Capital Notes; Q6; Q10, Note 11

Caps; QE06; QSI04

Cash; Q2; Q6; QE12

Cash Equivalents; Q2; Q6; QE13

Claims; Q3; Q4; Q8; Q9

Collars; QE06; QSI04

Commissions; Q6

Common Stock; Q2; Q3; Q6; Q11.1; Q11.2

Cost Containment Expenses; Q4

Contingencies; Q10, Note 14

Counterparty Exposure; Q10, Note 8; QE06; QE08

Debt; Q10, Note 11

Deferred Compensation; Q10, Note 12

Derivative Instruments; Q10, Note 8; QSI04; QSI05; QSI06; QSI07; QE06; QE07; QE08

Discontinued Operations; Q10, Note 4

Electronic Data Processing Equipment; Q2

Encumbrances; Q2; QSI01; QE01

Emergency Room; Q4

Expenses; Q3; Q4; Q6

Extinguishment of Liabilities; Q10, Note 17

Extraordinary Item; Q10, Note 21

Fair Value; Q7, Note 20

Fee for Service; Q4

Foreign Exchange; Q2; Q3; Q5; QSI01; QSI03; QE01; QE02; QE03; QE05

Forwards; QE06; QSI04

Furniture, Equipment and Supplies; Q2

Guaranty Fund; Q2

Health Care Receivables; Q2; Q9; Q10, Note 28

Holding Company; Q16

Hospital/Medical Benefits; Q4

Incentive Pools; Q3; Q4; Q8; Q9

Income; Q4; Q5; Q6

Income Taxes; Q2; Q3; Q4; Q5; Q10, Note 9

Incurred Claims and Claim Adjustment Expenses; Q10, Note 25

Intercompany Pooling; Q10, Note 26

Investment Income; Q10, Note 7

 Accrued; Q2

 Earned; Q2; QSI03

 Received; Q6

Investments; Q10, Note 5; Q11.1; Q11.2; QE08

Joint Venture; Q10, Note 6

Leases; Q10, Note 15

Limited Liability Company (LLC); Q10, Note 6

Limited Partnership; Q10, Note 6

Long-Term Invested Assets; Q2; QE03

Managing General Agents; Q10, Note 19

Medicare Part D Coverage; QSupp1

Member Months; Q4; Q7

Mortgage Loans; Q2; Q6; Q11.1; QSI01; QE02

Nonadmitted Assets; Q2; Q5; QSI01; QSI03

Off-Balance Sheet Risk; Q10, Note 16

Options; QE06; QSI04

Organizational Chart; Q11; Q14

Out-of-Area; Q4

Outside Referrals; Q4

Parent, Subsidiaries and Affiliates; Q2; Q3; Q10, Note 10; Q11.1

Participating Policies; Q10, Note 29

Pharmaceutical Rebates; Q10, Note 28

Policyholder Dividends; Q5; Q6

Postemployment Benefits; Q10, Note 12

Postretirement Benefits; Q10, Note 12

Preferred Stock; Q2; Q3; Q6; Q11.1; Q11.2

**INDEX TO HEALTH
QUARTERLY STATEMENT**

Premium Deficiency Reserves; Q10, Note 30

Premiums and Considerations

 Advance; Q3

 Collected; Q6

 Deferred; Q2

 Direct; Q7; Q13

 Earned; Q7

 Retrospective; Q2

 Uncollected; Q2

 Unearned; Q4

 Written; Q4; Q7

Prescription Drugs; Q4

Quasi Reorganizations; Q10, Note 13

Real Estate; Q2; Q6; QE01; QSI01

Redetermination, Contracts Subject to; Q10, Note 24

Reinsurance; Q9; Q10, Note 23

 Ceded; Q3; Q12

 Funds Held; Q2

 Payable; Q3

 Premiums; Q3

 Receivable; Q2; Q4

 Unauthorized; Q3; Q5

Reserves

 Accident and Health; Q3; Q4

 Claim; Q3; Q5; Q8

 Life; Q3

Retirement Plans; Q10, Note 12

Retrospectively Rated Policies; Q10, Note 24

Risk Revenue; Q4

Salvage and Subrogation; Q10, Note 31

Securities Lending; Q2; Q3; QE09; QE11

Servicing of Financial Assets; Q10, Note 17

Short-Term Investments; Q2; Q6; Q11.1; QSI03

Stockholder Dividends; Q5; Q6

Subsequent Events; Q10, Note 22

Surplus; Q3; Q5; Q6

Surplus Notes; Q3; Q5; Q6

Swaps; QE07; QSI04

Synthetic Assets; QSI04; QSI05

Third Party Administrator; Q10, Note 19

Treasury Stock; Q3; Q5

Uninsured Accident and Health; Q2; Q3; Q10, Note 18

Valuation Allowance; QSI01

Wash Sales; Q10, Note 17

Withholds; Q4; Q8